DECLARATION and POWER OF A

ATTORNEY'S DOCKET NO .: PHN 17.637 US

As a below named inventor, I hereby declar	e mat:
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My residence, post office address and citizenship are as stated below next to the name.

I believe I am the original, first and sole inventor (if only one name is listed below that the original inventor (if plural). names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "Multiple access communication system"

the	specification	of which	(check	one)

is attached hereto.

September 08, 2000 as Application Serial No. 09/658,096 and was amended on was filed on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37,

Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or

inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APP. NUMBER	DATE OF FILING (DATE, MONTH, YEAR)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
Europe	99202953.8	10 September 1999	YES

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1,56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

PRIOR UNITED STATES APPLICATION(S)

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward Blocker, Reg. No. 30,245

SEND CORRESPONDENCE TO: Corporate Patent Counsel; U.S. Philips Corporation;

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Dated: October 04	, 2000	Inventor's Signature:	- H-jde
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Dated: October C	5, 2000	Inventor's Signature:	
Full Name of in Inventor	Last Name VAN DRIEL	First Name Carel	Middle Name Jan Leendert
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Inventor's Signature: Dated: October 09, Full Name of in Last Name First Name Middle Name Inventor HANENBERG Robert Marinus State of Foreign Country Country of Citizenship Residence & City Eindhoven The Netherlands Citizenship The Netherlands Post Office Address Street State of Country Zip Prof. Holstlaan 6 5656 AA Eindhoven The Netherlands Code Inventor's Signature: Dated: Middle Name Full Name of in Last Name First Name Inventor Residence & City State of Foreign Country Country of Citizenship Citizenship Post Office Address City State of Country Street Zip Code Inventor's Signature: Dated: Full Name of in Last Name First Name Middle Name Inventor State of Foreign Country Country of Citizenship Residence & City Citizenship Post Office Address State of Country Street City Zip Code Dated: Inventor's Signature: Full Name of in Last Name First Name Middle Name Inventor • Residence & City State of Foreign Country Country of Citizenship Citizenship Post Office Address Street State of Country City Zip Code Dated: Inventor's Signature: Full Name of in Last Name First Name Middle Name Inventor Residence & City State of Foreign Country Country of Citizenship Citizenship Post Office Address Street City State of Country Zip Code